

## Aquifer Protection Permit Compliance Checklist

*This checklist is provided as a tool for permit holders and ADEQ staff to have a consistent understanding of the major compliance expectations under this permit. This checklist is designed to be easy to read and follow. It is intended only to address the permit requirements that ADEQ feels are the most important to protect human health and the environment. This list does not include every permit condition and permit holders should ensure they understand the full requirements of their permit. This list does not supplant or supersede any legal requirement and is not binding on the permit holder or ADEQ staff.*

<b>Facility Name:</b> Gunnison Copper Project <b>Place ID:</b> 147653	<b>Inspection No:</b> Click here to enter text. <b>Inspection Date:</b> Click here to enter text.			
<b>Inventory/Permit #:</b> 511633 <b>Current LTF#:</b> 61397	<b>Inspector(s):</b> Click here to enter text.			
<b>Facility Address:</b> Click here to enter text. <b>City, State, Zip:</b> Click here to enter text. <b>County:</b> Choose an item.	<b>Inspector Phone:</b> Click here to enter text. <b>Inspector Email:</b> Click here to enter text.			
<b>Permittee/Responsible Party:</b> Click here to enter text. <b>Contact:</b> Click here to enter text. <b>Mailing Address:</b> Click here to enter text. <b>City, State, Zip:</b> Click here to enter text. <b>Phone:</b> Click here to enter text. <b>Email:</b> Click here to enter text.	<b>WWTP Population Served:</b> Click here to enter text. <b>Treatment Plant Grade:</b> Click here to enter text. <b>Collection System Grade:</b> Click here to enter text.			
<b>Operator/ID:</b> Click here to enter text. <b>Phone:</b> Click here to enter text. <b>Email:</b> Click here to enter text. <b>Op. Cert. Grade/Expiration:</b> Click here to enter text.	<b>Compliance Summary:</b> Certified Operator <input type="checkbox"/> Yes <input type="checkbox"/> No Physical Facilities <input type="checkbox"/> Yes <input type="checkbox"/> No Monitoring and Reporting <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Results of Inspection:</b> <input type="checkbox"/> No deficiencies were noted during the course of the inspection. No ADEQ action will result from this inspection. <input type="checkbox"/> Potential deficiencies were noted during the course of the inspection. Additional correspondence regarding this Inspection may be forthcoming.				
<table style="width: 100%;"> <tr> <td style="width: 50%;"><b>Inspection Report Issued:</b> Choose an item.</td> <td style="width: 25%;"><b>Facility Initial:</b></td> <td style="width: 25%;"><b>ADEQ Initial:</b></td> </tr> </table>		<b>Inspection Report Issued:</b> Choose an item.	<b>Facility Initial:</b>	<b>ADEQ Initial:</b>
<b>Inspection Report Issued:</b> Choose an item.	<b>Facility Initial:</b>	<b>ADEQ Initial:</b>		
<b>Potential Deficiencies:</b>				
<b>PHOTOGRAPHS TAKEN DURING INSPECTIONS ARE AVAILABLE ON REQUEST</b>				

Documentation:	Requirement met?	Comments
Does the facility have SMRF non-submittals or exceedances?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
If yes, do the exceedances meet the requirements for significant non-compliance? <i>(list in Comments)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Were required notifications provided for violation of any permit condition, discharge limit, or exceedance of an alert level? <i>(list notifications in Comments)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Were SMRFs and monitoring requirements discussed with the facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have any outstanding or overdue compliance schedule items? (Section 3.0 in the permit)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have a copy of the current signed permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Is there a copy of the operations and maintenance manual on-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Is there a copy of the approved contingency/emergency response plan on-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Was there any unauthorized discharge of suspected hazardous, toxic, or non-hazardous materials? If so list corrective actions taken. (Section 2.6.5)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Facility Description and Operational Monitoring Requirements</b>	<b>Requirement met?</b>	<b>Comments</b>
Is the log book of the inspections and measurements required by this permit updated and current?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Do the facility treatment processes match what is in the current permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Is the facility being maintained according to the Operations and Maintenance Manual?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Freeboard in Recharge Basin: Minimum 2 ft?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Freeboard in Storage Basin: Minimum 2 ft?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Do the treatment plant components appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Storage pond berm integrity: Is there any visible structural damage, breach, or erosion of embankments?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Recharge Basins: Are they in good condition and adequately scarified?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Do the vadose zone wells appear to be in good working order? No evidence of biofouling, clogging, daylighting?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Compliance Monitoring</b>	<b>Requirement met?</b>	<b>Comments</b>
<b>Stage 1</b>		
<b>POC-1(Wellfield)</b> Loc: 32° 04' 46.4" 110° 02' 25.5" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-2 (Wellfield)</b> Loc: 32° 04' 48.6" 110° 02' 03.5" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-3 (Wellfield)</b> Loc: 32° 05' 00.9" 110° 02' 05.4" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-6 (Conceptual)</b> Loc: 32° 04' 56.2" 110° 02' 03.04" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Stages 2 &amp; 3</b>		
<b>POC-4 (Wellfield)</b> Loc: 32° 05' 18.3" 110° 02' 19.9" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-5 (Wellfield)</b> Loc: 32° 05' 25.3" 110° 02' 38.9" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-7 (Conceptual)</b> Loc: 32° 05' 02.3" 110° 02' 06.1" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-8 (Conceptual)</b> Loc: 32° 05' 10.1" 110° 01' 57.7" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-9 (Conceptual)</b> Loc: 32° 05' 19.6" 110° 01' 56.3" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>POC-10 (Conceptual)</b> Loc: 32° 05' 29.6" 110° 01' 51.5" <input type="checkbox"/> Location verified?  <input type="checkbox"/> Does the well appear to be in working order?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Field Methods – Is the facility using applicable on-site calibrations and quality assurance for BOD, T, pH, and turbidity?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have a written QA manual for all analysis done on-site?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are ADHS approved methods used for all analyses?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Did the facility have a method detection limit study for lab methods?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are on-site lab instruments properly calibrated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are on-site calibration and baseline reagents current and not expired?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Are on-site flow meters properly calibrated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Does the facility have a bench log sheet?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

**RECOMMENDATIONS AND POTENTIAL DEFICIENCIES:**